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To: Mr. Yean - Asi Chang
Art Unit 2835 From: Eric Wells
Fax: 571 2738300 Pages: 28

Phone: 901 848-9618⁹⁰¹ 628742 Date: 07-18-05

Re: Application 10/603,246 CC:

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Number Fax from
662-838-4579

611 Jennette Place
Memphis, TN 38126
July 13, 2005

Mr. Yean-Hsi Chang
Art Unit 2835
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Dear Mr. Chang:

Thank you for your time and assistance in clarifying my patent. I have read through your brief and attempted to solve the problems in which you informed me of. However, my understanding may not have been as clear as it should, but I tried to correct to the best of my understanding, your requirements.

Sincerely,

Eric Wells

FROM : EVT

PHONE NO. : 6628384579

Jul. 18 2005 11:20AM P03

PAGE 3/36 * RCVD AT 7/18/2005 12:16:15 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/27 * DNIS:2738300 * CSID:6628384579 * DURATION (mm-ss):11-38

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

28

Filing Date	06/26/2003
First Named Inventor	Eric Wells
Art Unit	2835
Examiner Name	Yean-Hsi Chang
Attorney Docket Number	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
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Remarks

I am sending corrected material, including explanations, clarification of prior art, claims, drawings, and description of prior art.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature	<i>Eric Wells</i>		
Printed name	Eric Wells		
Date	7-16-05	Reg. No.	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>Eric Wells</i>	Date	7-16-05
Typed or printed name	Eric Wells		

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the patent which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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